

Fill in this information to identify the case:

Debtor Name Helena Racanelli
United States Bankruptcy Court for the: _____ District of _____
Case number: 16-22617

☐ Check if this is an amended filing

Official Form 425C

Monthly Operating Report for Small Business Under Chapter 11

12/17

Month: 7/1/2021

Date report filed: 07/31/2021
MM / DD / YYYY

Line of business: _____

NAISC code: _____

In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.

Responsible party: Helena Racanelli
Original signature of responsible party: Helena Racanelli
Printed name of responsible party: Helena Racanelli

1. Questionnaire

Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.

Yes No N/A

If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.

- | | | | |
|----------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 1. Did the business operate during the entire reporting period? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Do you plan to continue to operate the business next month? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Have you paid all of your bills on time? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did you pay your employees on time? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Have you timely filed your tax returns and paid all of your taxes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Have you timely filed all other required government filings? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 8. Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Have you timely paid all of your insurance premiums? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit B.

- | | | | |
|-----------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|-------------------------------------|
| 10. Do you have any bank accounts open other than the DIP accounts? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 11. Have you sold any assets other than inventory? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 13. Did any insurance company cancel your policy? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any unusual or significant unanticipated expenses? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 15. Have you borrowed money from anyone or has anyone made any payments on your behalf? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 16. Has anyone made an investment in your business? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Debtor Name Helen Racanelli

Case number 16-22617

17. Have you paid any bills you owed before you filed bankruptcy?

☐ ☒ ☐

18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?

☐ ☒ ☐

2. Summary of Cash Activity for All Accounts

19. Total opening balance of all accounts

This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case.

\$ 261,702.35

20. Total cash receipts

Attach a listing of all cash received for the month and label it *Exhibit C*. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit C*.

Report the total from *Exhibit C* here.

\$ 708.11

21. Total cash disbursements

Attach a listing of all payments you made in the month and label it *Exhibit D*. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of *Exhibit D*.

Report the total from *Exhibit D* here.

- \$ 9,140.72

22. Net cash flow

Subtract line 21 from line 20 and report the result here.

This amount may be different from what you may have calculated as *net profit*.

\$ 8,432.61

23. Cash on hand at the end of the month

Add line 22 + line 19. Report the result here.

Report this figure as the *cash on hand at the beginning of the month* on your next operating report.

This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit.

= \$ 253,269.74

3. Unpaid Bills

Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it *Exhibit E*. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from *Exhibit E* here.

24. Total payables

(*Exhibit E*)

\$ N/A

Debtor Name Helen Racanelli

Case number 16-22617

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25. Total receivables
(Exhibit F)

\$ N/A

5. Employees

26. What was the number of employees when the case was filed?
27. What is the number of employees as of the date of this monthly report?

N/A
N/A

6. Professional Fees

28. How much have you paid this month in professional fees related to this bankruptcy case?
29. How much have you paid in professional fees related to this bankruptcy case since the case was filed?
30. How much have you paid this month in other professional fees?
31. How much have you paid in total other professional fees since filing the case?

\$ N/A
\$ N/A
\$ N/A
\$ N/A

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	Column A	Column B	Column C
	Projected	Actual	Difference
	Copy lines 35-37 from the previous month's report.	Copy lines 20-22 of this report.	Subtract Column B from Column A.
32. Cash receipts	\$ <u>8,456.70</u>	\$ <u>708.11</u>	= \$ <u>7,748.59</u>
33. Cash disbursements	\$ <u>6,400</u>	\$ <u>9,140.72</u>	= \$ <u>2,740.72</u>
34. Net cash flow	\$ <u>2,056.70</u>	\$ <u>-8,432.61</u>	= \$ <u>-6,375.91</u>

35. Total projected cash receipts for the next month:
36. Total projected cash disbursements for the next month:
37. Total projected net cash flow for the next month:

\$ 8,456.70
- \$ 6,400
= \$ 2,056.70

Debtor Name

Heber Racanelli

Case number

16-22617

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- ☒ 38. Bank statements for each open account (redact all but the last 4 digits of account numbers).
- ☒ 39. Bank reconciliation reports for each account.
- ☐ 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- ☐ 41. Budget, projection, or forecast reports.
- ☐ 42. Project, job costing, or work-in-progress reports.

Wells Fargo Everyday Checking

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HELEN RACANELLI
DEBTOR IN POSSESSION
CH11 CASE #16-22617 ((SNY))
16 RIVERSIDE PL
DOBBS FERRY NY 10522-1605

Questions?

Available by phone 24 hours a day, 7 days a week:
We accept all relay calls, including 711

1-800-742-4932

En español: 1-877-727-2932

Online: wellsfargo.com

Write: Wells Fargo Bank, N.A. (348)
P.O. Box 6995
Portland, OR 97228-6995

You and Wells Fargo

Thank you for being a loyal Wells Fargo customer. We value your trust in our company and look forward to continuing to serve you with your financial needs.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com or call the number above if you have questions or if you would like to add new services.

Online Banking	<input checked="" type="checkbox"/>	Direct Deposit	<input checked="" type="checkbox"/>
Online Bill Pay	<input type="checkbox"/>	Auto Transfer/Payment	<input type="checkbox"/>
Online Statements	<input checked="" type="checkbox"/>	Overdraft Protection	<input type="checkbox"/>
Mobile Banking	<input checked="" type="checkbox"/>	Debit Card	<input type="checkbox"/>
My Spending Report	<input checked="" type="checkbox"/>	Overdraft Service	<input type="checkbox"/>

Other Wells Fargo Benefits

Help take control of your finances with a Wells Fargo Personal Loan.

Whether it's managing debt, making a large purchase, improving your home, or paying for unexpected expenses, a personal loan may be able to help. See personalized rates and payments in minutes with no impact to your credit score, before you apply.

Go to wellsfargo.com/personalloan or call 1-855-324-9370, Monday through Friday, from 8:00 a.m. to 7:00 p.m. Central Time.

Statement period activity summary

Beginning balance on 7/1	\$261,702.35
Deposits/Additions	708.11
Withdrawals/Subtractions	- 9,140.72
Ending balance on 7/31	\$253,269.74

Account number: **4573**

HELEN RACANELLI
DEBTOR IN POSSESSION
CH11 CASE #16-22617 ((SNY))

New York account terms and conditions apply

For Direct Deposit use
Routing Number (RTN):

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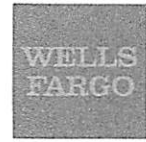
Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo branch.

Transaction history

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
7/1		Purchase authorized on 06/29 Wood and Fire 914-7472611 NY S301181031665303 Card 6549		59.03	
7/1		Purchase authorized on 06/30 Sams Italian Resta Dobbs Ferry NY S301181740144019 Card 6549		18.00	
7/1		Mellife P C Ins Paymnt Jul 21 xxxxx1485 Racanelli Helen		186.91	
7/1	146	Check		100.00	
7/1	143	Check		100.00	261,238.41
7/2		Purchase authorized on 07/01 Battaglia Brothers Dobbs Ferry NY S581182596357793 Card 6549		50.10	
7/2		Purchase authorized on 07/01 Cvs/Pharmacy #0030 Ardsley NY S581182739806478 Card 6549		27.45	
7/2		Purchase authorized on 07/02 Decicco & Sons Ardsley NY P00461183637756697 Card 6549		94.90	
7/2		Purchase authorized on 07/02 Mixology 45 Spencer P Scarsdale NY P00000000587376385 Card 6549		29.23	
7/2	145	Check		400.00	260,636.73
7/6		Purchase authorized on 07/03 Social Apparel - P West Nyack NY S461184696791502 Card 6549		34.43	
7/6		Purchase authorized on 07/03 Windsor Fashion #157 1 West Nyack NY P00000000781250521 Card 6549		38.56	
7/6		Purchase authorized on 07/03 Victoria's Secret 0798 West Nyack NY P00381184737297907 Card 6549		56.88	
7/6		Purchase authorized on 07/05 Stop & Shop 0530 390 B Dobbs Ferry NY P00000000487188245 Card 6549		129.03	
7/6		Zelle to Racanelli Sophia on 07/05 Ref #Rp0Bvfqphq		50.00	
7/6		Zelle to Racanelli Sophia on 07/05 Ref #Rp0Bvth5H		40.00	
7/6		Sacredheart Univ Emarket 210701 0857930 Helen Racanelli		4,285.80	256,002.03
7/7		Purchase authorized on 07/07 Tjmaxx #0 425 N Centra Hartsdale NY P00000000673024086 Card 6549		69.82	
7/7		Zelle to Racanelli Sophia on 07/07 Ref #Rp0Bvtyh6R		20.00	255,912.21
7/8		Purchase authorized on 07/07 Cvs/Pharmacy #0030 Ardsley NY S381188662182503 Card 6549		116.42	
7/8		Purchase authorized on 07/08 Stew Leonards-Yo 1 Stew L Yonkers NY P00581189612578089 Card 6549		200.00	
7/8	147	Check		100.00	255,495.79
7/9		Purchase authorized on 07/09 Decicco & Sons Ardsley NY P00381190741738053 Card 6549		86.77	255,409.02
7/12		Purchase authorized on 07/09 Paypal *Newwayherb 402-935-7733 CA S581190796429822 Card 6549		28.17	
7/12		Recurring Payment authorized on 07/10 Tmobile*Auto Pay 800-937-8997 WA S381191377671571 Card 6549		163.00	
7/12		Purchase authorized on 07/10 Far East Wellness Yonkers NY S581191720955953 Card 6549		48.00	
7/12		Purchase authorized on 07/10 Burlington Stores 363 Yonkers NY P00461191815884661 Card 6549		33.59	
7/12		Purchase authorized on 07/11 Foodtown #530 Hasting on Hu NY P00000000670243714 Card 6549		23.49	
7/12		Purchase authorized on 07/12 Shoprite Scarsdale S1 Scarsdale NY P00461193638591435 Card 6549		164.77	254,948.00
7/13		Purchase authorized on 07/11 Hastings Tire Hastings on H NY S381192537359455 Card 6549		28.01	254,919.99
7/14		Purchase authorized on 07/14 Tjmaxx #0 425 N Centra Hartsdale NY P00000000539215947 Card 6549		35.47	

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Transaction history (continued)

<i>Date</i>	<i>Check Number</i>	<i>Description</i>	<i>Deposits/ Additions</i>	<i>Withdrawals/ Subtractions</i>	<i>Ending daily balance</i>
7/14		Purchase authorized on 07/14 Decicco & Sons Ardsley NY P00301195773445639 Card 6549		133.16	254,751.36
7/15		Purchase authorized on 07/15 Cvs/Pharm 07130-350 S Tarrytown NY P00000000682019225 Card 6549		12.99	
7/15	148	Check		20.00	
7/15	149	Check		4.57	254,713.80
7/16		Purchase authorized on 07/16 Shell Service Station Dobbs Ferry NY P00381197591397755 Card 6549		45.16	
7/16		Purchase authorized on 07/16 22010- Greenwich 151 G Greenwich CT P00000000180133075 Card 6549		185.04	
7/16	151	Check		100.00	254,383.60
7/19		Purchase authorized on 07/15 Salon 877 Ardsley NY S301196581509643 Card 6549		225.00	
7/19		Purchase authorized on 07/16 Tst* Z Hospitality Greenwich CT S381197725664485 Card 6549		136.32	
7/19		Purchase authorized on 07/17 Stew Leonards-Yo 1 Stew L Yonkers NY P00301198637119294 Card 6549		233.16	
7/19		Purchase authorized on 07/17 Bread Plus- Nz0 Brooklyn NY S581198820011941 Card 6549		22.61	
7/19		Purchase authorized on 07/17 Doterra*Int USA 800-411-8151 UT S301199106637143 Card 6549		53.88	
7/19		Recurring Payment authorized on 07/18 Spotify USA 877-7781161 NY S381200048890993 Card 6549		4.99	
7/19		Purchase authorized on 07/19 Stop & Shop 0530 390 B Dobbs Ferry NY P00000000781124408 Card 6549		158.08	253,549.56
7/21		Purchase authorized on 07/20 Walgreens #11291 Dobbs Ferry NY S461201571698432 Card 6549		70.23	
7/21		Purchase authorized on 07/20 Cvs/Pharmacy #0270 Brooklyn NY S581201819874008 Card 6549		6.91	
7/21		Purchase authorized on 07/21 Decicco & Sons Ardsley NY P00301202799719446 Card 6549		46.83	253,425.59
7/23		Purchase authorized on 07/22 Bobs Service Stati Hastings Hdsn NY S381203581657569 Card 6549		46.30	
7/23		Purchase authorized on 07/22 Lotus Leaf Atlantic City NJ S381203786910016 Card 6549		26.12	253,353.17
7/26		Purchase authorized on 07/24 Stop & Shop 0530 390 B Dobbs Ferry NY P00000000680733117 Card 6549		77.44	
7/26		Purchase authorized on 07/24 Burlington Stores 363 Yonkers NY P00381205767596930 Card 6549		100.63	
7/26		Zelle to Racanelli Sophia on 07/26 Ref #Rp0Bzrrwny		100.00	253,075.10
7/27		Purchase authorized on 07/26 Decicco & Sons Ardsley NY S581207764847421 Card 6549		150.74	
7/27		Purchase authorized on 07/27 Champion Parking 36 LI New York NY P00000000184073858 Card 6549		46.00	252,878.36
7/28		Purchase authorized on 07/27 Marsha Harris MD New York NY S381208578258215 Card 6549		30.00	
7/28		Purchase authorized on 07/27 A & S Italian Pork Brooklyn NY S461208641871037 Card 6549		53.30	
7/28		Purchase authorized on 07/28 Cvs/Pharm 00300-Ardsl Ardsley NY P00000000973858289 Card 6549		15.78	
7/28		Purchase authorized on 07/28 Ann Taylor Factory White Plains NY P00461209706496514 Card 6549		10.44	
7/28	152	Check		100.00	252,668.84
7/29		Purchase authorized on 07/27 Hastings Tire Hastings on H NY S301208540288955 Card 6549		54.21	
7/29		Zelle to Racanelli Sophia on 07/29 Ref #Rp0C2D3Cn7		50.00	252,564.63

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Transaction history (continued)

Date	Check Number	Description	Deposits/ Additions	Withdrawals/ Subtractions	Ending daily balance
7/30		MT Vernon Bd of Reg Salary 210730 21290000 Racanelli, Helen M	708.11		
7/30		Purchase authorized on 07/28 The Westchester MA White Plains NY S461209747581747 Card 6549		3.00	253,269.74
Ending balance on 7/31					253,269.74
Totals			\$708.11	\$9,140.72	

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Summary of checks written (checks listed are also displayed in the preceding Transaction history)

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
143	7/1	100.00	147	7/8	100.00	151 *	7/16	100.00
145 *	7/2	400.00	148	7/15	20.00	152	7/28	100.00
146	7/1	100.00	149	7/15	4.57			

* Gap in check sequence.

Monthly service fee summary

For a complete list of fees and detailed account information, see the disclosures applicable to your account or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 07/01/2021 - 07/31/2021		Standard monthly service fee \$10.00	You paid \$0.00
How to avoid the monthly service fee		Minimum required	This fee period
Have any ONE of the following account requirements			
• Minimum daily balance		\$500.00	\$252,564.63 <input checked="" type="checkbox"/>
• Total amount of qualifying direct deposits		\$500.00	\$708.11 <input checked="" type="checkbox"/>
• Age of primary account owner		17 - 24	<input type="checkbox"/>
• The fee is waived when the account is linked to a Wells Fargo Campus ATM or Campus Debit Card			

The Monthly service fee summary fee period ending date shown above includes a Saturday, Sunday, or holiday which are non-business days.

Transactions occurring after the last business day of the month will be included in your next fee period.

RC/RC



IMPORTANT ACCOUNT INFORMATION

Effective September 1, 2021, the non-Wells Fargo ATM balance inquiry fee will increase from \$2.00 to \$2.50, and the non-Wells Fargo ATM transfer fee will increase from \$2.00 to \$2.50. To avoid these fees, monitor your balances and transfer money by accessing Wells Fargo ATMs, calling the number on the back of your card, and using Wells Fargo Online® or the Wells Fargo Mobile® app. Availability may be affected by your mobile carrier's coverage area. Your mobile carrier's message and data rates may apply. These fees may not be applicable to all customers and may vary depending on the type of Account you have. For more details, refer to the applicable Wells Fargo Fee and Information Schedule for your Account.

Can we reach you when it's really important?

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Don't miss suspicious-activity alerts and critical account information. Please make sure your contact information is current by:

- Signing on to wells Fargo.com or the Wells Fargo Mobile® app and navigating to the Update Contact Information page via My Profile
- Contacting the phone number at the top of your statement
- Visiting a branch

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Worksheet to balance your account

Follow the steps below to reconcile your statement balance with your account register balance. Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn from your account during this statement period.

A Enter the ending balance on this statement. \$ _____

B List outstanding deposits and other credits to your account that do not appear on this statement. Enter the total in the column to the right.

Description	Amount
Total	\$ _____

C Add **A** and **B** to calculate the subtotal. + \$ _____

D List outstanding checks, withdrawals, and other debits to your account that do not appear on this statement. Enter the total in the column to the right. = \$ _____

Number/Description	Amount
Total	\$ _____

E Subtract **D** from **C** to calculate the adjusted ending balance. This amount should be the same as the current balance shown in your register. = \$ _____

General statement policies for Wells Fargo Bank

■ **To dispute or report inaccuracies in information we have furnished to a Consumer Reporting Agency about your accounts.** You have the right to dispute the accuracy of information that Wells Fargo Bank, N.A. has furnished to a consumer reporting agency by writing to us at Overdraft Collection and Recovery, P.O. Box 5058, Portland, OR 97208-5058. Please describe the specific information that is inaccurate or in dispute and the basis for the dispute along with supporting documentation. If you believe the information furnished is the result of identity theft, please provide us with an identity theft report.

■ **In case of errors or questions about your electronic transfers,** telephone us at the number printed on the front of this statement or write us at Wells Fargo Bank, P.O. Box 6995, Portland, OR 97228-6995 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number (if any).
2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

16-22617

Helen Racanelli

July 2021

Date	Check Number	Amount
July 1, 2021	146	\$100.00
July 1, 2021	143	\$100.00
July 2, 2021	145	\$400.00
July 8, 2021	147	\$100.00
July 15, 2021	148	\$20.00
July 15, 2021	149	\$4.57
July 28, 2021	152	\$100.00